



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov



CONFIRMATION NO. 8813

Bib Data Sheet

SERIAL NUMBER 09/929,236	FILING OR 371(c) DATE 08/13/2001 RULE	CLASS 083	GROUP ART UNIT 3724	ATTORNEY DOCKET NO. SDT 307
-----------------------------	------------------------------------------------	--------------	------------------------	-----------------------------------

APPLICANTS

Stephen F. Gass, Wilsonville, OR;
David S. D'Ascenzo, Portland, OR;
Andrew L. Johnston, Redwood City, CA;
Joel F. Jensen, Redwood City, CA;
Sung H. Kim, Palo Alto, CA;
Anwyl M. McDonald, Palo Alto, CA;

** CONTINUING DATA *****

This appln claims benefit of 60/225,056 08/14/2000 and claims benefit of 60/225,057 08/14/2000 and claims benefit of 60/225,058 08/14/2000 and claims benefit of 60/225,059 08/14/2000 and claims benefit of 60/225,089 08/14/2000 and claims benefit of 60/225,094 08/14/2000 and claims benefit of 60/225,169 08/14/2000 and claims benefit of 60/225,170 08/14/2000 and claims benefit of 60/225,200 08/14/2000 and claims benefit of 60/225,201 08/14/2000 and claims benefit of 60/225,206 08/14/2000 and claims benefit of 60/225,210 08/14/2000 and claims benefit of 60/225,211 08/14/2000 and claims benefit of 60/225,212 08/14/2000

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 09/14/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS DRAWING 9	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

27630

TITLE

REPLACEABLE BRAKE MECHANISM FOR POWER EQUIPMENT

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
---------------------	------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------

655

No. _____ for following:

1.18 Fees (Issue)

Other _____

Credit